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SHERIDAN R 1560 BROADW SUITE 1200	YAY	/2011	I he Sta add trar	Certify that this tes Postal Service wiressed to the Mail samitted to the USPT	ificate of s Fee(s) the suffice Stop ISS O (571)	f Mailing or Transm Transmittal is being ient postage for first SUE FEE address a 273-2885, on the da	dission deposited with the United class mail in an envelope bove, or being facsimile te indicated below.
DENVER, CO 8	00202		<u> </u>				(Depositor's name)
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							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.		EY DOCKET NO.	CONFIRMATION NO.
10/598,517 09/01/2006		•	Paul R. Kruesi	1001-6-PUS		01-6-PUS	6754
TTLE OF INVENTION	: CARBON-FUELED F	TUEL CELL					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE ′	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0		\$1055	05/03/2011
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
BUCHANAN, JACOB		1725	429-477000	_			
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternatic (2) the name of a sing registered attorney or	single firm (having as a member a v or agent) and the names of up to attorneys or agents. If no name is			
			THE PATENT (print or ty				
recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee bletion of this form is NO	data will appear on the p T a substitute for filing an	atent. If an assigne assignment.	e is iden	tified below, the do	cument has been filed for
(A) NAME OF ASSIG	CITY and STATE OR COUNTRY)						
Cato Rese	arch Corpor	Golden, C	0				
lease check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🛚 Cor	rporation	or other private grou	p entity 🗖 Government
a. The following fee(s) a  Issue Fee  Publication Fee (N  Advance Order - 4	No small entity discount p	<ul> <li>a. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 191970 (enclose an extra copy of this form).</li> </ul>					
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a. Applicant claim	s SMALL ENTITY statu	is. See 37 CFR 1.27.	☐ b. Applicant is no lon	ger claiming SMAL	L ENTIT	ΓY status. See 37 CF	R 1.27(g)(2).
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